

**UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)**

**Charitta Burt, Paralegal**

U. S. Application No. 10/536647  
Publication Date 6-17-04  
Publication No. WO 2004/052020 PCT/RO/101 \_\_\_\_\_  
Copy of ISR EP, Copy of IPER \_\_\_\_\_  
Assignee information: \_\_\_\_\_  
Priority Info: Country US No. 60/430919 date 12-4-02 MORE  
Correspondence checked: 24737 deposit account 14-1270  
Inventor Residence city: \_\_\_\_\_, state and/or country \_\_\_\_\_ citizenship: \_\_\_\_\_  
International Application No. PCT DB2003 1005440 Language Eng  
Copy in International Application: ☒; Translation: yes \_\_\_\_\_ no \_\_\_\_\_ Spec.pg no. \_\_\_\_\_  
371 Filing Fees: 2900; US IPER meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_  
Total Claims: 56 Chargeable 56 Independent 4 multiple \_\_\_\_\_  
Number of drawing Sheets: 5 Foreign language: \_\_\_\_\_  
Oath/Declaration: ☒ signed ☐ unsigned ☐ defective ☐ completed 5-27-05 Power of Attorney: ☒  
Small entity fee: \_\_\_\_\_ SME document yes \_\_\_\_\_ no \_\_\_\_\_  
Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_  
Article 19 Amendment: \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_  
Copy ISA References \_\_\_\_\_  
Copy of IPER: \_\_\_\_\_; Annexes: ☒ entered ☐ not entered \_\_\_\_\_ Text sequence improper \_\_\_\_\_  
Preliminary Amendment(s): ☒ date: 5-27-05; 2<sup>nd</sup> amendment date \_\_\_\_\_  
IDS: ☒ DATE: 5-27-05 2<sup>nd</sup> \_\_\_\_\_ DATE \_\_\_\_\_  
Request for Immediate Examination: \_\_\_\_\_  
Substitute Specification: ☒ date: \_\_\_\_\_  
Assignment: ☒ forwarded to Assignment branch date: \_\_\_\_\_  
Priority Document(s): ☒ Number of copies included 1  
Date of 35 USC Receipt of Request: 21 May 05 **Notes:** \_\_\_\_\_  
Date Completion USC 371 Requirements: 27 May 05 |  
Notice of Missing Requirements: \_\_\_\_\_ |  
Notice of Defective Response: \_\_\_\_\_ |  
Notice of Acceptance: \_\_\_\_\_ |  
Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_  
Other forms: \_\_\_\_\_ Extension of time: Number of months \_\_\_\_\_